

SERIAL NUMBER 09/382,622	FILING DATE 08/25/99	CLASS 604	GROUP ART UNIT 3734	ATTORNEY DOCKET NO. PHO-107-DIV
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APPLICANT

H. CRAIG DEES, KNOXVILLE, TN; TIMOTHY SCOTT, KNOXVILLE, TN; JOHN T. SMOLIK, LOUDON, TN; ERIC A. WACHTER, OAK RIDGE, TN.

****CONTINUING DOMESTIC DATA*******
 VERIFIED THIS APPLN IS A CON OF 09/216,787 12/21/98

****371 (NAT'L STAGE) DATA*******
 VERIFIED

****FOREIGN APPLICATIONS*******
 VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 09/09/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TN	SHEETS DRAWING 4	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 2
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ADDRESS

EDWARD D MANZO
 COOK ALEX MCFARRON MANZO CUMMINGS
 & MEHLER LTD
 200 WEST ADAMS STREET SUITE 2850
 CHICAGO IL 60606

TITLE

HIGH ENERGY PHOTOTHERAPEUTIC AGENTS

FILING FEE RECEIVED \$488	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5477

SERIAL NUMBER 09/382,622	FILING DATE 08/25/1999 RULE	CLASS 424	GROUP ART UNIT 1641	ATTORNEY DOCKET NO. PHO-107-DIV
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APPLICANTS

H. CRAIG DEES, KNOXVILLE, TN;

TIMOTHY SCOTT, KNOXVILLE, TN;

JOHN T. SMOLIK, LOUDON, TN; ERIC A. WACHTER, OAK RIDGE, TN;

** CONTINUING DATA *****

This application is a CON of 09/216,787 12/21/1998 PAT 6,331,286

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 09/09/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TN	SHEETS DRAWING 4	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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60606

TITLE

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FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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